PTO/SB/06 (08-01)

Approved for use through 7/31/2006. OMB 0651-003 U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCS

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 ′δ 6 CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE BASIC FEE RATE FEE (37 CFR 1.16(a)) TOTAL CLAIMS OR (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = OB MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) = OR " If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) OR (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST IENT A REMAINING PRESENT NUMBER RATE ADDI-RATE **AFTER** PREVIOUSLY ADDI-**EXTRA** TIONAL AMENDMENT PAID FOR TIONAL FEE ENDMI Total (37 CFR 1.16(c)) FEE Minus 20 3 50 /50 OR Independent (37 CFR 1.16(b)) Minus 3 200 OR 00 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE 0 (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST മ REMAINING PRESENT NUMBER RATE ADDI-RATE **AFTER** ADDI-PREVIOUSLY **EXTRA** TIONAL AMENDMENT TIONAL PAID FOR FEE ENDMI Total (37 CFR 1.16(c)) FEE Minus OR Independent (37 CFR 1.16(b)) Minus ₹ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST \mathbf{O} REMAINING NUMBER PRESENT RATE ADDI-AMENDMENT AFTER RATE ADDI-PREVIOUSLY **EXTRA** TIONAL AMENDMENT TIONAL PAID FOR FEE Total (37 CFR 1.16(c)) FEE Minus OR Minus x s OR X \$ = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3" The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									10/67967/				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			18		-			RATE	FEE] [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/1 minus 20=		•		[;	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*			X43=		OR	X86=		
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT				145=		OR	+290=	71		
* 15	the difference	in column 1 is l	less than zero, enter "0" in column 2					OTAL		OR	TOTAL	710	
	C						OTHER	4					
		(Column 1)		(Column :		(Column 3)	SMALLE			OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	ſ	RATE TIONA FEE			RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	,	K\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X43=			OR	X86=		
⋖	FIRST PRESE	ILTIPLE DEPENDENT		CLAIM			145=	<u></u>	1	+290=			
TOTAL										OR	TOTAL		
									L	OR	ADDIT. FEE	,	
		(Column 1) CLAIMS		(Colui		(Column 3)			ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	f	RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	,	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
⋖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=		OR	+290=	-	
TOTAL ADDIT. FEE									OR	TOTAL ADDIT, FEE			
(Column 1) (Column 2) (Column 3)										-			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUM PREVI	EST	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=	<u> </u>	OR	X86=		
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1	.000		
+145= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										OR	ADDIT. FEE		
	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	lent) is the	e highest numbe	er found	in the ap	propriate b	ox in co	olumn 1.		